

CITY OF STAMFORD

BP-20 \_\_\_\_\_

BUILDING BUREAU

SWO #: 20 \_\_\_\_\_

DEPARTMENT APPROVAL FOR BUILDING PERMIT

Owner's Name: \_\_\_\_\_ Address: \_\_\_\_\_

Gen. Contractor: \_\_\_\_\_ Address: \_\_\_\_\_

Architect: \_\_\_\_\_ Address: \_\_\_\_\_

Job Address: \_\_\_\_\_ Location: \_\_\_\_\_

Permission to: \_\_\_\_\_

\*\* 1) Owner  Applicant  or Contractor  is  was  a City of Stamford Employee  or Official

2) No Building Permit will be issued until the following signatures are obtained with reference to above mentioned project

Required ( ) N/A ( )

Assessor's Office: \_\_\_\_\_

Lot#: \_\_\_\_\_ List#: \_\_\_\_\_

Card#: \_\_\_\_\_ Date: \_\_\_\_\_

( ) ( ) Tax Collector: \_\_\_\_\_

( ) ( ) Construction Waste Recycling: \_\_\_\_\_

( ) ( ) Zoning: \_\_\_\_\_

( ) ( ) Coastal Management: \_\_\_\_\_

( ) ( ) Envir. Prot: \_\_\_\_\_

( ) ( ) Flood Plain: \_\_\_\_\_

( ) ( ) Fire Marshal: \_\_\_\_\_

( ) ( ) Health Dept: \_\_\_\_\_

( ) ( ) Housing Code: \_\_\_\_\_

( ) ( ) Traffic Dept: \_\_\_\_\_

( ) ( ) Engineering Dept: \_\_\_\_\_

Is Street Opening Permit Required?  Yes  No

( ) ( ) D.O.T.: \_\_\_\_\_

( ) ( ) W.P.C.A.: \_\_\_\_\_

( ) ( ) Building Official: \_\_\_\_\_

Upon securing the required signatures, return this document to the Division of Building Inspection, City of Stamford.

Dir. of Operations: \_\_\_\_\_

By: \_\_\_\_\_

Robert D. DeMarco  
Chief Building Official

Date: \_\_\_\_\_

**BUILDING BUREAU  
CITY OF STAMFORD**

**Please Note: This form MUST be completed prior to any permit issued by the Bldg Dept**

Investigation Fees prior to Certificate of Occupancy - Certificate of Approval

Please be advised that your signature, as the owner requesting a Building, Electrical, Plumbing & HVAC permit will be required certifying your clear understanding of what would be required if final inspections have not been obtained prior to a Certificate of Occupancy or approval.

(NOTE) Effective October 1, 2012 Public Act 12-184 has been adopted whenever any alteration or additions take place in a one or two family dwelling occupied during construction that a battery operated smoke alarm and a CO alarm if required be installed. Public Act 12-184 can be viewed @[www.cga.ct.gov](http://www.cga.ct.gov)

**Section 123.5 of the Stamford code of ordinances are as follows;**

- (1) Certificate of Occupancy shall be required for all new construction, pools, decks or accessory structures before occupancy where the work has not been inspected or finalized in accordance with the Connecticut State Building Code. Alterations and renovations shall require a Certificate of Approval for all completed work that does not require a Certificate of Occupancy. Any person, owner or contractor who allows occupancy and has not obtained an approval before final inspections are made shall be subject to a fee of Two Hundred Dollars (\$200.00).
- (2) Whenever a Certificate of Occupancy is requested by an owner from the Building Department for construction, alterations or any activity requiring a permit, one year or more after final inspections have been performed (or partial Certificate of Occupancy have been issued), an additional fee of Two Hundred Dollars (\$200.00) shall be paid by the owner before said certificate is issued.
- (3) Whenever any Electrical, Plumbing or Mechanical permit is issued for any work, and such work has been completed but no Certificate of Approval has been obtained within one year of completion, the permittee shall pay a fee of Two Hundred Dollars (\$200.00).

I \_\_\_\_\_ certify that on \_\_\_\_\_  
(Print) Building Owner's Name Date  
at the address known as \_\_\_\_\_ have read

the above ordinance investigation fees that will be assessed if final inspections have not been obtained for Certificate of Occupancy, or Certificate of Approval.

Signed \_\_\_\_\_  
Signature of Building Owner

**OVER**

**WORKERS' COMPENSATION COVERAGE AFFIDAVIT**

In accordance with Public Act 96-216, Section 4, effective June 4, 1996 and as Permittee on the project listed below I hereby choose the following option to verify compliance with the above stated Connecticut Workers' Compensation Laws (Select ONLY one):

**PROJECT IDENTIFICATION:**

PROPERTY OWNER(S) \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

APT/UNIT NO. \_\_\_\_\_ SECTION OF CITY \_\_\_\_\_ CT \_\_\_\_\_

DESCRIPTION OF WORK \_\_\_\_\_

**HOMEOWNER:**

I, \_\_\_\_\_, the owner of the above described property will be acting as General Contractor on this project, and hereby swear and attest that I will require proof of Workers' Compensation Insurance from each and every subcontractor or other worker before he/she engages in work on my property for this project.

**SOLE PROPRIETOR:**

I, \_\_\_\_\_, the contractor working on the above referenced project claim exemption from Public Act 96-216 as a sole proprietor and do not intend to act as a general contractor or principal employer on this project. I understand that this means I am not engaging anyone to work under me on this project.

**CONTRACTOR:**

I, \_\_\_\_\_, intend to act as a general contractor on the above referenced project and hereby swear and attest that I will require proof of Workers' Compensation Insurance from all subcontractors and all other workers employed on this job site. I understand it is my responsibility to insure compliance with the CT Workers' Compensation Laws on this project.

**CORPORATE OFFICER OR BUSINESS PARTNER:**

I, \_\_\_\_\_, claim exemption for myself from the CT Workers' Compensation Laws by obtaining a certificate of exemption from the Workers' Compensation Commission. I am submitting verification of same by the following:

- Certificate of Insurance (must be attached)
- Commission's exemption certificate (must be attached).

I understand this exempts only myself and I hereby swear and attest that I will require proof of Workers' Compensation Insurance from all subcontractors and all other workers employed on this project.

In accordance with Public ACR 96-216, Section 4, I hereby state that I fully understand that every person employed or engaged to perform services on this construction site (including sole proprietors, independent contractors, and both owners and employees of subcontracting companies), are required to have Workers' Compensation Insurance. I also understand that there are new significant penalties under the Workers' Compensation Laws for misrepresenting one's employer status.

(Signed) \_\_\_\_\_ date \_\_\_\_\_

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20



## **DEMOLITION NOTICE**

**As of August 17 2009, The CT Post is now placing ads for the Stamford Advocate. Because of this payment will no longer be accepted at the Advocate's Stamford location.**

**Once the City of Stamford –Building Department has e-mailed the demolition ad to the Advocate, it will be the responsibility of the contractor or owner of said property(ies) to make payment directly to below address. Payment can be made either by credit card or by mailing a check to the address below.**

**Attn: SaRan Housey  
Legal Classified  
CT Post  
410 State Street  
Bridgeport, CT 06604  
(203) 330-6208**

**The Stamford Advocate will not place the ad until payment is made. Once demolition is advertised this will begin the time required before issuing the demolition permit – unless someone contests the demolition.**

**Thank you for your cooperation**

**Building Department  
Robert D. DeMarco  
Chief Building Official**